STATE OF NEW HAMPSHIRE



PLEASE PRINT

2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

RECEIVED

FEB 0 4 2019

NEW HAMPSHIRE

l. Name of Lobbyist(s	;) <u>Tyl</u>	er Clo	irk		DEPARTMENT OF ST
II. Name of lobbyist's	' ' partnership, fir	m or corporati	on, if any:		
Dennehy	& Boul	er LI			
IT Dec	of partnership, find	rm of corporation)	Concord	NH	03301
Business Address: (Su	rect)	(Town/	City)	(State)	(Zip Code)
603 228-16 (Telephone)	001	()	(Fax) e-r	nail	
III. This statement co reportable expense tr	overs: (Choose or ransactions which	ne – file separat h are not attrib	e reports for each clic utable to any one clie	ent, OR you may f nt).	ile a separate report for
SL All reportable tran	Mite	Moun	prior to the reporting di Harry Front the Lobbyist Registrati	Sia Dix	ollowing client:
OR ☐ All reportable transurrelated to any particular	sactions by the lol		•		m listed below which are
IV. Date of Report Reports cover: activ	April 25, 2018 tity from date of res October 31, 20 activity from 7/1/1	gistration to 3/31/ 018 🔲	18 activity from Janua	15, 2018	·
V. There have been If this box is checked, Concord, NH 03301.	n no fees receiv complete just this	ed and no rep s form and subm	ortable transactions it it to the Secretary of	s made since the State's Office, Stat	last report. (204,
VI. Check if addition	nal reports are a	ttached:			
☐ If you have receive	ved fees or made	expenditures, yo	u must file Addendun	A – Fees and Expe	enses
☐ If you have paid a Expense Reimbursem		reimbursed expo	enses, you must file Ac	Idendum B– Kepo	n of monorariums of
☐ If you, your firm,	or your family h	as made politica	l contributions, you mu	ist file Addendum	C- Political Contributions
Sworn Statement/Af I have read RSA 15, and complete to the b (Signature of lobby): (Print Name of lobb)	RSA 15-B, RSA lost of my knowle	14-C and RSA 6	64 and hereby swear o	r affirm that the for $1\sqrt{28}\sqrt{9}$ (Date)	egoing information is true